

Fill in this information to identify the case

Debtor name	<u>American Commercial Management, LLC</u>
United States Bankruptcy Court for the:	<u>SOUTHERN DISTRICT OF TEXAS</u>
Case number (if known)	<u>20-35718</u>

Check if this is an amended filing

Official Form 206A/B**Schedule A/B: Assets -- Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

No. Go to Part 2.
 Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand**3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
<u>Wells Fargo</u>	<u>Operating</u>	<u>8 1 6 2</u>	<u>\$50.00</u>
<u>Community Bank</u>	<u>Operating</u>	<u>8 2 7 1</u>	<u>\$15,713.56</u>

4. Other cash equivalents (Identify all)

Name of institution (bank or brokerage firm)

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$15,763.56**Part 2: Deposits and prepayments****6. Does the debtor have any deposits or prepayments?**

No. Go to Part 3.
 Yes. Fill in the information below.

Debtor	<u>American Commercial Management, LLC</u>	Name	Case number (if known)	<u>20-35718</u>
Current value of debtor's interest				
7.	Deposits, including security deposits and utility deposits			
Description, including name of holder of deposit				
8.	Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent			
Description, including name of holder of prepayment				
8.1.	American Commercial Management - Prepaid Rent/Operating Expense (see attachment for detail)			<u>\$158,167.13</u>
9.	Total of Part 2.			<u>\$158,167.13</u>
Add lines 7 through 8. Copy the total to line 81.				

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

No. Go to Part 4.
 Yes. Fill in the information below.

Current value of debtor's interest				
11.	Accounts receivable			
11a.	90 days old or less:	<u>\$95,363.34</u>	-	<u>\$0.00</u>
	face amount	doubtful or uncollectible accounts	=	<u>\$95,363.34</u>
11b.	Over 90 days old:	<u>\$0.00</u>	-	<u>\$0.00</u>
	face amount	doubtful or uncollectible accounts	=	<u>\$0.00</u>

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$95,363.34

Part 4: Investments

13. Does the debtor own any investments?

No. Go to Part 5.
 Yes. Fill in the information below.

Valuation method used for current value				
14.	Mutual funds or publicly traded stocks not included in Part 1			
Name of fund or stock:				
15.	Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture			
Name of entity: % of ownership:				
15.1.	Branford Place Medical Specialists, LLC 7616 Branford Place, Suite 350 Sugar Land, Texas 77479			<u>10%</u> <u>\$0.00</u>
16.	Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1			
Describe:				
17.	Total of Part 4			<u>\$0.00</u>
Add lines 14 through 16. Copy the total to line 83.				

ATTACHMENT 8.1 –

On November 2, 2020, Suite 250 paid \$25,500.00 for January through April 2021 rent. This worked out to be \$3,375.50 per month in rent income and \$2,999.50 per month in operating income for a total of \$6,375.00 per month. The rent amount is \$8,501.44.

On November 2, 2020, Suite 320 Paid \$66,000.00 for January through April 2021 rent. This work out to be \$9,879.17 per month in rent income and \$6,620.83 per month in operating income for a total of \$16,500.00 per month. The rent amount is \$18,396.46.

On November 17, 2020, Suite 140 paid \$52,000.00 for January through April 2021 rent. This work out to be \$7,030.17 per month in rent income and \$5,969.83 per month in operating income for a total of \$13,000.00 per month. The rent amount of \$16,587.61.

On November 23, 2020, Suite 120 paid \$14,667.13 for January 2021 rent. This was \$8,922.47 in rent income and \$5,744.66 in operating income. The rent amount of \$16,167.13.

Debtor American Commercial Management, LLC _____ Case number (if known) 20-35718 _____
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Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

No. Go to Part 6.
 Yes. Fill in the information below.

General description	Date of the last physical inventory MM/DD/YYYY	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
20. Work in progress				
21. Finished goods, including goods held for resale				
22. Other inventory or supplies				
23. Total of Part 5				\$0.00

Add lines 19 through 22. Copy the total to line 84.

24. Is any of the property listed in Part 5 perishable?

No
 Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

No
 Yes. Book value _____ Valuation method _____ Current value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

No
 Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming or fishing-related assets (other than titled motor vehicles and land)?

No. Go to Part 7.
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops--either planted or harvested			
29. Farm animals Examples: Livestock, poultry, farm-raised fish			
30. Farm machinery and equipment (Other than titled motor vehicles)			
31. Farm and fishing supplies, chemicals, and feed			
32. Other farming and fishing-related property not already listed in Part 6			
33. Total of Part 6.			\$0.00

Add lines 28 through 32. Copy the total to line 85.

34. Is the debtor a member of an agricultural cooperative?

No
 Yes. Is any of the debtor's property stored at the cooperative?
 No
 Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

No
 Yes. Book value _____ Valuation method _____ Current value _____

Debtor American Commercial Management, LLC
Name _____

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36. Is a depreciation schedule available for any of the property listed in Part 6?

No
 Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

No
 Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

No. Go to Part 8.
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
Office Furniture			Unknown
40. Office fixtures			
41. Office equipment, including all computer equipment and communication systems equipment and software			
42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1. Three (3) Artworks	\$5,450.00	FMV	\$5,450.00
43. Total of Part 7. Add lines 39 through 42. Copy the total to line 86.			\$5,450.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

No
 Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

No
 Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

No. Go to Part 9.
 Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48. Watercraft, trailers, motors, and related accessories Examples: Boats trailers, motors, floating homes, personal watercraft, and fishing vessels			
49. Aircraft and accessories			

Debtor American Commercial Management, LLC
Name _____

Case number (if known) 20-35718

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$0.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

No
 Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

No
 Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

No. Go to Part 10.
 Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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55.1. **7616 Branford Place
Sugar Land, TX 77479**

Office Building	ownership	\$12,000,000.00	FMV	\$21,250,000.00
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56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$21,250,000.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

No
 Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

No
 Yes Obtained by Lender

Part 10: Intangibles and Intellectual Property

59. Does the debtor have any interests in intangibles or intellectual property?

No. Go to Part 11.
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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60. Patents, copyrights, trademarks, and trade secrets

61. Internet domain names and websites

62. Licenses, franchises, and royalties

Debtor American Commercial Management, LLC _____ Case number (if known) 20-35718 _____
 Name _____

63. Customer lists, mailing lists, or other compilations

64. Other intangibles, or intellectual property

65. Goodwill

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

No
 Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

No
 Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

No
 Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

No. Go to Part 12.
 Yes. Fill in the information below.

**Current value of
debtor's interest**

71. Notes receivable

Description (include name of obligor)

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

73. Interests in insurance policies or annuities

74. Causes of action against third parties (whether or not a lawsuit has been filed)

**75. Other contingent and unliquidated claims or causes of action of every nature,
including counterclaims of the debtor and rights to set off claims**

76. Trusts, equitable or future interests in property

77. Other property of any kind not already listed Examples: Season tickets, country club membership

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$0.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

No
 Yes

Debtor American Commercial Management, LLC _____ Case number (if known) 20-35718 _____
 Name _____

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	<u>\$15,763.56</u>	
81. Deposits and prepayments. Copy line 9, Part 2.	<u>\$158,167.13</u>	
82. Accounts receivable. Copy line 12, Part 3.	<u>\$95,363.34</u>	
83. Investments. Copy line 17, Part 4.	<u>\$0.00</u>	
84. Inventory. Copy line 23, Part 5.	<u>\$0.00</u>	
85. Farming and fishing-related assets. Copy line 33, Part 6.	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	<u>\$5,450.00</u>	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	<u>\$0.00</u>	
88. Real property. Copy line 56, Part 9.....	→	<u>\$21,250,000.00</u>
89. Intangibles and intellectual property. Copy line 66, Part 10.	<u>\$0.00</u>	
90. All other assets. Copy line 78, Part 11.	<u>+ \$0.00</u>	
91. Total. Add lines 80 through 90 for each column.	91a. <u>\$274,744.03</u>	91b. <u>\$21,250,000.00</u>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.....		<u>\$21,524,744.03</u>

Fill in this information to identify the case:

Debtor name	<u>American Commercial Management, LLC</u>
United States Bankruptcy Court for the:	<u>SOUTHERN DISTRICT OF TEXAS</u>
Case number (if known)	<u>20-35718</u>

Check if this is an amended filing

Official Form 206D**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.**1. Do any creditors have claims secured by debtor's property?**

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

2.1	Creditor's name <u>McREIF SUBREIT, LLC</u>	Describe debtor's property that is subject to a lien <u>First Lien</u>	<u>\$16,000,050.00</u>	<u>\$21,250,000.00</u>
	Creditor's mailing address <u>999 Corporate Drive, Suite 110</u>	Describe the lien <u>Statutory Lien</u>		
	Ladera Ranch CA 92694-2147	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Creditor's email address, if known	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H)		
	Date debt was incurred <u>01/07/2020</u>	As of the petition filing date, the claim is: Check all that apply.		
	Last 4 digits of account number _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority.			

Building Financing - Deed of Trust; Fort Bend County, Texas File #2020002229**3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.****\$18,914,636.57**

Debtor American Commercial Management, LLC Case number (if known) 20-35718

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A	Column B
Amount of claim	Value of collateral that supports this claim

2.2	Creditor's name <u>Nexgen Capital, LLC</u>	Describe debtor's property that is subject to a lien	\$2,900,000.00	\$21,250,000.00
	Creditor's mailing address <u>1600 Rosecrans Avenue, Building 1A</u>	Describe the lien		
		<u>Statutory Lien</u>		
		Is the creditor an insider or related party?		
	<u>Manhattan Beach CA 90266</u>	<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
	Creditor's email address, if known <u>amuller@nexgencapital.com</u>	Is anyone else liable on this claim?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	Date debt was incurred <u>01/21/2020</u>	As of the petition filing date, the claim is:		
	Last 4 digits of account number _____	Check all that apply.		
	Do multiple creditors have an interest in the same property?	<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> Yes. Have you already specified the relative priority?			
	<input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.			
	<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			

Deed of Trust; Fort Bend County; File Nos. 2020007888 and 20200055439

2.3	Creditor's name <u>Nicholson Plumbing</u>	Describe debtor's property that is subject to a lien	\$14,586.57	\$21,250,000.00
	Creditor's mailing address <u>1720-B Preston Avenue</u>	Ownership		
		Describe the lien		
		<u>Unsecured / Statutory Lien</u>		
		Is the creditor an insider or related party?		
	<u>Pasadena TX 77503</u>	<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
	Creditor's email address, if known	Is anyone else liable on this claim?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	Date debt was incurred <u>11/2019 - 02/2020</u>	As of the petition filing date, the claim is:		
	Last 4 digits of account number _____	Check all that apply.		
	Do multiple creditors have an interest in the same property?	<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> Yes. Have you already specified the relative priority?			
	<input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.			
	<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			

Mechanic's Lien - Fort Bend County File #2020135655

Fill in this information to identify the case:

Debtor	<u>American Commercial Management, LLC</u>
United States Bankruptcy Court for the:	<u>SOUTHERN DISTRICT OF TEXAS</u>
Case number (if known)	<u>20-35718</u>

Check if this is an amended filing

Official Form 206E/F**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.
 Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or part.

If more space is needed for priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address Carrie Surratt, PCC, CTOP	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$243,588.84</u> <u>\$243,588.84</u>
	Fort Bend County Tax Assessor-Collector P. O. Box 4277	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Houston TX 77210	Basis for the claim: <u>Taxes</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number <u>0 9 0 7</u>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>8</u>)		
2.2	Priority creditor's name and mailing address City of Sugar Land P. O. Box 5029	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$641.06</u> <u>\$641.06</u>
	Sugar Land TX 77487-5029	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: <u>Taxes</u>	
	Last 4 digits of account number <u> </u>	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>8</u>)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor American Commercial Management, LLC Case number (if known) 20-35718**Part 1: Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

		Total claim	Priority amount
2.3	Priority creditor's name and mailing address <u>Fort Bend L.I.D. #17</u> <u>c/o Esther Buentello Flores, RTA</u> <u>P. O. Box 4545</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$74,592.00</u> <u>\$74,592.00</u>
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Houston TX 77210-4545	Basis for the claim: <u>Taxes</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number <u>0 9 0 7</u>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>8</u>)		
2.4	Priority creditor's name and mailing address <u>Fort Bend MUD 138</u> <u>c/o Esther Buentello Flores, RTA</u> <u>P. O. Box 4545</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$46,620.00</u> <u>\$46,620.00</u>
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Houston TX 77210-4545	Basis for the claim: <u>Taxes</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number <u>0 9 0 7</u>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>8</u>)		

Debtor American Commercial Management, LLC Case number (if known) 20-35718**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If more space is needed for nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$1,550.00
<u>All Star Striping</u> <u>16510 Mustang Trail, Suite 350</u>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
 	Basis for the claim: <u>Trade Debt</u>	
Magnolia TX 77355	Is the claim subject to offset?	
Date or dates debt was incurred	<input checked="" type="checkbox"/> No	
Last 4 digits of account number	<input type="checkbox"/> Yes	
 	As of the petition filing date, the claim is: Check all that apply.	\$32,404.00
American Commercial Contractors <u>7616 Branford Place, Suite 350</u>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
 	Basis for the claim: <u>Trade Debt</u>	
Sugar Land TX 77479	Is the claim subject to offset?	
Date or dates debt was incurred	<input checked="" type="checkbox"/> No	
Last 4 digits of account number	<input type="checkbox"/> Yes	
 	As of the petition filing date, the claim is: Check all that apply.	\$18,785.00
Classic Concrete Construction <u>P. O. Box 939</u>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
 	Basis for the claim: <u>Trade Debt</u>	
Dayton TX 77535	Is the claim subject to offset?	
Date or dates debt was incurred	<input checked="" type="checkbox"/> No	
Last 4 digits of account number	<input type="checkbox"/> Yes	
 	As of the petition filing date, the claim is: Check all that apply.	\$209.99
3.4 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$209.99
Comcast <u>P. O. Box 60533</u>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
 	Basis for the claim: <u>Trade Debt</u>	
City of Industry CA 91716-0533	Is the claim subject to offset?	
Date or dates debt was incurred	<input checked="" type="checkbox"/> No	
Last 4 digits of account number	<input type="checkbox"/> Yes	

Debtor American Commercial Management, LLC Case number (if known) 20-35718**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.5 Nonpriority creditor's name and mailing address <u>DAC, Inc.</u> <u>11251 Northwest Freeway, Suite 200</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$165.00
Basis for the claim: <u>Trade Debt</u>		
Houston TX 77092 Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.6 Nonpriority creditor's name and mailing address <u>Do It All Janitorial Services</u> <u>2135 Canyon Crest Drive</u>		
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$26,701.81
Basis for the claim: <u>Trade Debt</u> Date or dates debt was incurred _____ Last 4 digits of account number _____		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.7 Nonpriority creditor's name and mailing address <u>Dr. Michael L. Sonabend, MD</u> <u>7616 Branford Place, Suite 240</u>		
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$0.00
Basis for the claim: <u>Notice Only</u> Date or dates debt was incurred _____ Last 4 digits of account number _____		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.8 Nonpriority creditor's name and mailing address <u>Edward McHorse</u> <u>McGinnis Lochridge, LLP</u> <u>600 Congress Avenue, Suite 2100</u>		
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$0.00
Basis for the claim: <u>Notice Only</u> Date or dates debt was incurred _____ Last 4 digits of account number _____		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor American Commercial Management, LLC Case number (if known) 20-35718**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.9 Nonpriority creditor's name and mailing address <u>GH Mechanical and Services, LLC</u> <u>1615 Poydras Street, Suite 2120</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$990.07
Basis for the claim: <u>Trade Debt</u>		
New Orleans LA 70112 Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.10 Nonpriority creditor's name and mailing address <u>Gwyneth A. Campbell, Senior Counsel</u> <u>Chapoton Sanders Scharborough, LLP</u> <u>952 Echo Lane, Suite 380</u>		
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Basis for the claim: <u>Notice Only</u>		
Date or dates debt was incurred _____ Last 4 digits of account number _____		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.11 Nonpriority creditor's name and mailing address <u>Holder's Pest Solutions</u> <u>P. O. Box 600730</u>		
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Basis for the claim: <u>Trade Debt</u>		
Date or dates debt was incurred _____ Last 4 digits of account number _____		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.12 Nonpriority creditor's name and mailing address <u>HVAC Mechanical Services of Texas, Ltd.</u> <u>Hunton Services</u> <u>P. O. Box 4591</u>		
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Basis for the claim: <u>Trade Debt</u>		
Date or dates debt was incurred _____ Last 4 digits of account number _____		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor American Commercial Management, LLC Case number (if known) 20-35718**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.13 Nonpriority creditor's name and mailing address <u>Jennifer Whitis CPA, PLLC</u> <u>7320 Highway 90A, Suite 130</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,025.00
Basis for the claim: <u>Trade Debt</u>		
Sugar Land TX 77478 Date or dates debt was incurred _____ Last 4 digits of account number _____ - _____ - _____ - _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.14 Nonpriority creditor's name and mailing address <u>John Tyer</u> <u>1602 Hill Spring Drive</u>		
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$12,415.58
Basis for the claim: <u>Trade Debt</u>		
Sugar Land TX 77479 Date or dates debt was incurred _____ Last 4 digits of account number _____ - _____ - _____ - _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.15 Nonpriority creditor's name and mailing address <u>KONE, Inc.</u> <u>4156 P. O. Box 894156</u>		
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,570.53
Basis for the claim: <u>Trade Debt</u>		
Los Angeles CA 90189-4156 Date or dates debt was incurred _____ Last 4 digits of account number _____ - _____ - _____ - _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.16 Nonpriority creditor's name and mailing address <u>LS Stripping</u> <u>9914 Willow Crossing Drive</u>		
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$2,350.00
Basis for the claim: <u>Trade Debt</u>		
Houston TX 77064 Date or dates debt was incurred _____ Last 4 digits of account number _____ - _____ - _____ - _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor American Commercial Management, LLC Case number (if known) 20-35718**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.17 Nonpriority creditor's name and mailing address <u>McREIF SUBREIT, LLC</u> <u>999 Corporate Drive, Suite 110</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$336,946.15
Basis for the claim: <u>Trade Debt</u>		
Date or dates debt was incurred <hr/> Last 4 digits of account number <hr/>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.18 Nonpriority creditor's name and mailing address <u>MLN Fire Protection Company</u> <u>10101 Mula Road</u>		
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,373.23
Basis for the claim: <u>Trade Debt</u>		
Date or dates debt was incurred <hr/> Last 4 digits of account number <hr/>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.19 Nonpriority creditor's name and mailing address <u>Nomi Holdings, LLC</u> <u>7616 Branford Place, Suite 240</u>		
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$84,375.00
Basis for the claim: <u>Trade Debt</u>		
Date or dates debt was incurred <hr/> Last 4 digits of account number <hr/>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.20 Nonpriority creditor's name and mailing address <u>Office of the United States Trustee</u> <u>c/o Jana Smith Whitworth, Attorney</u> <u>515 Rusk, Suite 3516</u>		
As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$0.00
Basis for the claim: <u>Notice Only</u>		
Date or dates debt was incurred <hr/> Last 4 digits of account number <hr/>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor American Commercial Management, LLC Case number (if known) 20-35718**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.21 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** **\$848.00**

Performance Drywall, LLC221 S. 19th Street, Suite CWaco TX 76701

Date or dates debt was incurred

Last 4 digits of account number

Check all that apply.

Contingent
 Unliquidated
 Disputed

Basis for the claim:

Trade Debt

Is the claim subject to offset?

No
 Yes

3.22 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** **\$3,577.28**

Plant Interscapes, Inc.6436 Babcock Road

Check all that apply.

Contingent
 Unliquidated
 Disputed

Basis for the claim:

Trade Debt

Is the claim subject to offset?

No
 Yes

3.23 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** **\$0.00**

Rachael L. Smiley2500 Dallas Parkway, Suite 600

Check all that apply.

Contingent
 Unliquidated
 Disputed

Basis for the claim:

Notice Only

Is the claim subject to offset?

No
 Yes

Plano TX 75093

Date or dates debt was incurred

Last 4 digits of account number

3.24 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** **\$7,424.19**

Check all that apply.

Contingent
 Unliquidated
 Disputed

Basis for the claim:

Trade Debt

Is the claim subject to offset?

No
 Yes

Dallas TX 75265-0475

Date or dates debt was incurred

Last 4 digits of account number

Debtor American Commercial Management, LLC Case number (if known) 20-35718**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.25 Nonpriority creditor's name and mailing address <u>Republic Services #853</u> <u>P. O. Box 78829</u> <hr/> <u>Phoenix</u> <u>AZ</u> <u>85062-8829</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,180.06
Basis for the claim: <u>Trade Debt</u>		
Date or dates debt was incurred _____		Is the claim subject to offset?
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.26 Nonpriority creditor's name and mailing address <u>Richard L. Spencer</u> <u>Kenneth H. Holt</u> <u>Ferguson Braswell Fraser Kubasta, PC</u> <u>3200 Southwest Freeway, Suite 3200</u> <u>Houston</u> <u>TX</u> <u>77027</u>		
		As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		Basis for the claim: <u>Notice Only</u>
Date or dates debt was incurred _____		Is the claim subject to offset?
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.27 Nonpriority creditor's name and mailing address <u>Specialty Credit Holdings, LLC</u> <u>c/o Silver Point Capital, LP</u> <u>Two Greenwich Plaza, 1st Floor</u> <hr/> <u>Greenwich</u> <u>CT</u> <u>06830</u>		
		As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
		Basis for the claim: <u>Loan</u>
Date or dates debt was incurred <u>11/01/2017</u>		Is the claim subject to offset?
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.28 Nonpriority creditor's name and mailing address <u>Texas Tax Protest</u> <u>2950 North Loop West, Suite 500</u> <hr/> <u>Houston</u> <u>TX</u> <u>77092</u>		
		As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		Basis for the claim: <u>Trade Debt</u>
Date or dates debt was incurred _____		Is the claim subject to offset?
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor American Commercial Management, LLC Case number (if known) 20-35718**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.29 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: \$11,705.14

The Hanover Insurance GroupP. O. Box 580045Charlotte NC 28258-0045

Date or dates debt was incurred

Last 4 digits of account number

Check all that apply.

- Contingent
- Unliquidated
- Disputed

Basis for the claim:

Trade Debt

Is the claim subject to offset?

- No
- Yes

3.30 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: \$0.00

Trevor JenkinsBryan Cave Leighton Paisner, LLPOne Kansas City Place1200 Main Street, Suite 3800Kansas City MO 64105-2122

Date or dates debt was incurred

Last 4 digits of account number

Check all that apply.

- Contingent
- Unliquidated
- Disputed

Basis for the claim:

Notice Only

Is the claim subject to offset?

- No
- Yes

3.31 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: \$4,800.00

Vicente BaezBaez Landscaping170 Shiloh DriveRichmond TX 77469

Date or dates debt was incurred

Last 4 digits of account number

Check all that apply.

- Contingent
- Unliquidated
- Disputed

Basis for the claim:

Trade Debt

Is the claim subject to offset?

- No
- Yes

3.32 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: \$1,178.44

WindstreamP. O. Box 9001908Louisville KY 40290-1908

Date or dates debt was incurred

Last 4 digits of account number

Check all that apply.

- Contingent
- Unliquidated
- Disputed

Basis for the claim:

Trade Debt

Is the claim subject to offset?

- No
- Yes

Debtor American Commercial Management, LLC Case number (if known) 20-35718**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

	Total of claim amounts
5a. Total claims from Part 1	5a. <u>\$365,441.90</u>
5b. Total claims from Part 2	5b. + <u>\$574,548.91</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	<u>\$939,990.81</u>

Fill in this information to identify the case:

Debtor name	<u>American Commercial Management, LLC</u>	
United States Bankruptcy Court for the: <u>SOUTHERN DISTRICT OF TEXAS</u>		
Case number (if known)	<u>20-35718</u>	Chapter <u>11</u>

Check if this is an amended filing

Official Form 206G**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	Lease Contract to be ASSUMED	<u>American Commercial</u> <u>7616 Branford Place, Suite 335</u>
	State the term remaining		
	List the contract number of any government contract		
2.2	State what the contract or lease is for and the nature of the debtor's interest	Lease Contract to be ASSUMED	<u>American Commercial</u> <u>7616 Branford Place, Suite 340</u>
	State the term remaining		
	List the contract number of any government contract		<u>Sugar Land</u> <u>TX</u> <u>77479</u>
2.3	State what the contract or lease is for and the nature of the debtor's interest	Lease Contract to be ASSUMED	<u>American Commercial</u> <u>7616 Branford Place, Suite 350</u>
	State the term remaining		
	List the contract number of any government contract		<u>Sugar Land</u> <u>TX</u> <u>77479</u>
2.4	State what the contract or lease is for and the nature of the debtor's interest	Lease Contract to be ASSUMED	<u>Aspire Fertility</u> <u>7616 Branford Place, Suite 310</u>
	State the term remaining		
	List the contract number of any government contract		<u>Sugar Land</u> <u>TX</u> <u>77479</u>

Debtor American Commercial Management, LLC Case number (if known) 20-35718**Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.5 State what the contract or lease is for and the nature of the debtor's interest	Lease Contract to be ASSUMED Complete Dermatology 7616 Branford Place, Suite 240
State the term remaining	_____
List the contract number of any government contract	Sugar Land TX 77479
2.6 State what the contract or lease is for and the nature of the debtor's interest	Janitorial Service Contract to be ASSUMED Do It All Janitorial c/o Jimmy Kilpatrick 2135 Canyon Crest Drive
State the term remaining	_____
List the contract number of any government contract	Sugar Land TX 77479
2.7 State what the contract or lease is for and the nature of the debtor's interest	Lease Contract to be ASSUMED Dr. Ahmed & Dr. Jabeen dba EZ Healthcare 7616 Branford Place, Suite 220
State the term remaining	_____
List the contract number of any government contract	Sugar Land TX 77479
2.8 State what the contract or lease is for and the nature of the debtor's interest	Lease Contract to be ASSUMED Dr. J. Szeto 7616 Branford Place, Suite 250
State the term remaining	_____
List the contract number of any government contract	Sugar Land TX 77479
2.9 State what the contract or lease is for and the nature of the debtor's interest	Lease Contract to be ASSUMED Dreamcare Pharmacy 7616 Branford Place, Suite 330
State the term remaining	_____
List the contract number of any government contract	Sugar Land TX 77479

Debtor American Commercial Management, LLC Case number (if known) 20-35718**Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

	List all contracts and unexpired leases	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease	
2.10	State what the contract or lease is for and the nature of the debtor's interest	Lease Contract to be ASSUMED	Edward Jones 7616 Branford Place, Suite 130
	State the term remaining		
	List the contract number of any government contract		Sugar Land TX 77479
2.11	State what the contract or lease is for and the nature of the debtor's interest	Fire Alarms Contract to be ASSUMED	Fire Safe Protection Services, LP 1815 Sherwood Forest
	State the term remaining		
	List the contract number of any government contract		Houston TX 77043
2.12	State what the contract or lease is for and the nature of the debtor's interest	Lease Contract to be ASSUMED	Fort Bend Rheumatology 7616 Branford Place, Suite 320
	State the term remaining		
	List the contract number of any government contract		Sugar Land TX 77479
2.13	State what the contract or lease is for and the nature of the debtor's interest	Parking Violation/Towing Contract to be ASSUMED	GTA Towing 9639 Hillcroft, Suite 850
	State the term remaining		
	List the contract number of any government contract		Houston TX 77096
2.14	State what the contract or lease is for and the nature of the debtor's interest	Pest Control Contract to be ASSUMED	Holder Pest Control 10530 Hockley Road, Suite 110
	State the term remaining		
	List the contract number of any government contract		Houston TX 77099

Debtor American Commercial Management, LLC Case number (if known) 20-35718

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<p>List all contracts and unexpired leases</p>	<p>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</p>	
<p>2.15 State what the contract or lease is for and the nature of the debtor's interest</p>	<p>Lease Contract to be ASSUMED</p>	<p>Internal Medicine Associates/Sugar Land 7616 Branford Place, Suite 120</p>
<p>State the term remaining</p>		
<p>List the contract number of any government contract</p>		<p>Sugar Land TX 77479</p>
<p>2.16 State what the contract or lease is for and the nature of the debtor's interest</p>	<p>Lease Contract to be ASSUMED</p>	<p>NIRP 7616 Branford Place, Suite 140</p>
<p>State the term remaining</p>		
<p>List the contract number of any government contract</p>		<p>Sugar Land TX 77479</p>
<p>2.17 State what the contract or lease is for and the nature of the debtor's interest</p>	<p>Plant Service Contract to be ASSUMED</p>	<p>Plant Interscapes 6436 Babcock Road</p>
<p>State the term remaining</p>		
<p>List the contract number of any government contract</p>		<p>San Antonio TX 78249</p>
<p>2.18 State what the contract or lease is for and the nature of the debtor's interest</p>	<p>Energy Services Contract to be ASSUMED</p>	<p>Reliant Energy Retail Services 1201 Fannin</p>
<p>State the term remaining</p>		
<p>List the contract number of any government contract</p>		<p>Houston TX 77002</p>
<p>2.19 State what the contract or lease is for and the nature of the debtor's interest</p>	<p>Trash Service (City of Sugar Land Required) Contract to be ASSUMED</p>	<p>Republic Services 13630 Fondren Road</p>
<p>State the term remaining</p>		
<p>List the contract number of any government contract</p>		<p>Houston TX 77085</p>

Debtor American Commercial Management, LLC Case number (if known) 20-35718**Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease	
2.20 State what the contract or lease is for and the nature of the debtor's interest	Lease Contract to be ASSUMED	Sugarland NeoPeds 7616 Branford Place, Suite 150
State the term remaining		
List the contract number of any government contract		Sugar Land TX 77479

Fill in this information to identify the case:

Debtor name	<u>American Commercial Management, LLC</u>
United States Bankruptcy Court for the:	<u>SOUTHERN DISTRICT OF TEXAS</u>
Case number (if known)	<u>20-35718</u>

Check if this is an amended filing

Official Form 206H**Schedule H: Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**Column 1: Codebtor****Column 2: Creditor****Name****Mailing address****Name**

*Check all schedules
that apply:*

Fill in this information to identify the case:Debtor Name American Commercial Management, LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number (if known): 20-35718 Check if this is an amended filing**Official Form 206Sum****Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets--Real and Personal Property** (Official Form 206A/B)**1a. Real property:**

Copy line 88 from Schedule A/B.....

\$21,250,000.00**1b. Total personal property:**

Copy line 91A from Schedule A/B.....

\$274,744.03**1c. Total of all property**

Copy line 92 from Schedule A/B.....

\$21,524,744.03**Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D.....

\$18,914,636.57**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of Schedule E/F.....

\$365,441.90**3b. Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F.....

+ \$574,548.91**4. Total liabilities**

Lines 2 + 3a + 3b.....

\$19,854,627.38

Fill in this information to identify the case and this filing:

Debtor Name	<u>American Commercial Management, LLC</u>
United States Bankruptcy Court for the:	<u>SOUTHERN DISTRICT OF TEXAS</u>
Case number (if known)	<u>20-35718</u>

Official Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets--Real and Personal Property (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- Schedule H: Codebtors (Official Form 206H)
- A Summary of Assets and Liabilities for Non-Individuals (Official Form 206-Summary)
- Amended Schedule _____
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 12/17/2020
MM / DD / YYYY

X /s/ Susan Rozman
Signature of individual signing on behalf of debtor

Susan Rozman
Printed name
Manager
Position or relationship to debtor